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|---|-----------------------------|-------|---|---|----------------------------|--------------------|----|-----|
| RESPONSE TRANSMITTAL LETTER | | | | | Docket Number EMS-02001 | | | |
| Application Number 09/940,903 | Filing Date August 28, 2001 | | Examiner SHINGLES, Kristie D. | | tie D. Gro | oup Art Unit 41 | | |
| Invention Title SRDF ASSIST | | | | | | | | |
| TO THE COMMISSIONER FOR PATENTS | | | | | | | | |
| Transmitted herewith is a response in the above-identified application, including: | | | | | | | | |
| (X) Response to Office Action (X) Response Transmittal (in duplicate) (X) Return Postcard CLAIMS AS PRESENTED | | | | | | | | |
| | | | | | | | | |
| | (1) | I | (2) | | (3) | DATE | | |
| | CLAIMS AS PRESENTED | | HIGHEST NUMBER PREVIOUSLY PAID FOR | | PRESENT NUMBER EXTRA | RATE | | FEE |
| TOTAL CLAIMS | 41 | Minus | 62 | 2 | 0 | x \$ 50 | \$ | 0 |
| INDEPENDENT CLAIMS | 5 | Minus | 9 | 9 | 0 | x \$200 | \$ | 0 |
| MULTIPLE DEPENDENT CLAIM ADDED | | | | | | \$360 | \$ | |
| TOTAL | | | | | | | \$ | 0 |
| If applicant has small entity status under 37 CFR 1.9 and 1.27, then divide total fee by 2, and enter amount here. | | | | | | \$ | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the highest number previously paid for Total Claims in column 2 is less than 20, enter "20." *** If the highest number previously paid for Independent Claims in column 2 is less than 3, enter "3." The "highest number previously paid for" (total or independent) is the highest number found in the appropriate box in column 1. | | | | | | | | |
| Please charge Deposit Account Number 503596 in the amount of \$ A duplicate copy of this sheet is enclosed. | | | | | | | | |
| () A check in the amount of \$ to cover the filing fee is enclosed. | | | | | | | | |
| (X) Please credit any overpayment and/or charge any additional filing fees required under 37 CFR §§ 1.16 and 1.17 to our Deposit Account Number 503596. | | | | | | | | |
| I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on July 26, 2006. Donald W. Muirhead, Reg. No. 33, 978 Donald W. Muirhead Donald W. Muirhead | | | | | | | | |

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Peter KAMVYSSELIS

: Art Unit: 2141

Filed: August 28, 2001

Appl. No.: 09/940,903

Examiner: SHINGLES, Kristie D.

For: SRDF ASSIST

Docket No.: EMS-02001

CERTIFICATE OF MAILING

I hereby certify that the foregoing document is being deposited with the United States Postal Service as first class mail, postage prepaid, "Post Office to Addressee", in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 26, 2006.

hald W. Muirhead

RESPONSE TO OFFICE ACTION

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

This paper is being provided in response to the Final Office Action dated May 18, 2006, for the above-captioned U.S. patent application.

Claims are listed beginning on page 2 of this paper.

Remarks begin on page 11 of this paper.

It is not believed that extensions of time or fees for net addition of claims are required, beyond those which may otherwise be provided for in documents accompanying this paper. However, in the event that additional extensions of time are necessary, then such extensions of time are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required for consideration of this paper (including fees for net addition of claims) are authorized to be charged in two originally-executed copies of a Transmittal Letter filed herewith.